



# The Role of the Infection Preventionist



Basics of Infection Prevention  
2-Day Mini-Course  
October-November 2011

# Objective

- Describe the role of the Infection Preventionist (IP) in health care
- Discuss relationships important to success in performing the IP



"To cite an often-spoken metaphor that helps us understand what's happening with this ongoing tragedy, it's as if a steady stream of automobiles is hurtling toward a cliff and then plunging into destruction. A community leader catches sight of the devastating carnage and springs into action. However, instead of rushing to the top of the cliff and finding a way to prevent drivers from speeding toward disaster, the bureaucrat parks a fleet of ambulances at the bottom of the cliff."

Patterson et al, (2008). *Influencer*. McGraw Hill, New York

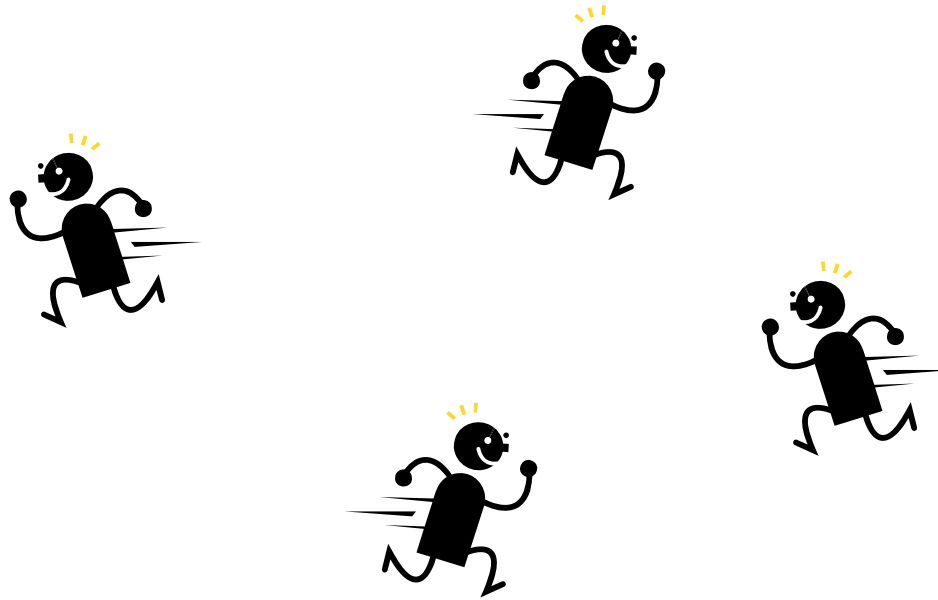


Often times, when we need the cooperation and clear direction of those around us...

Instead of coordinated efforts...

we get...





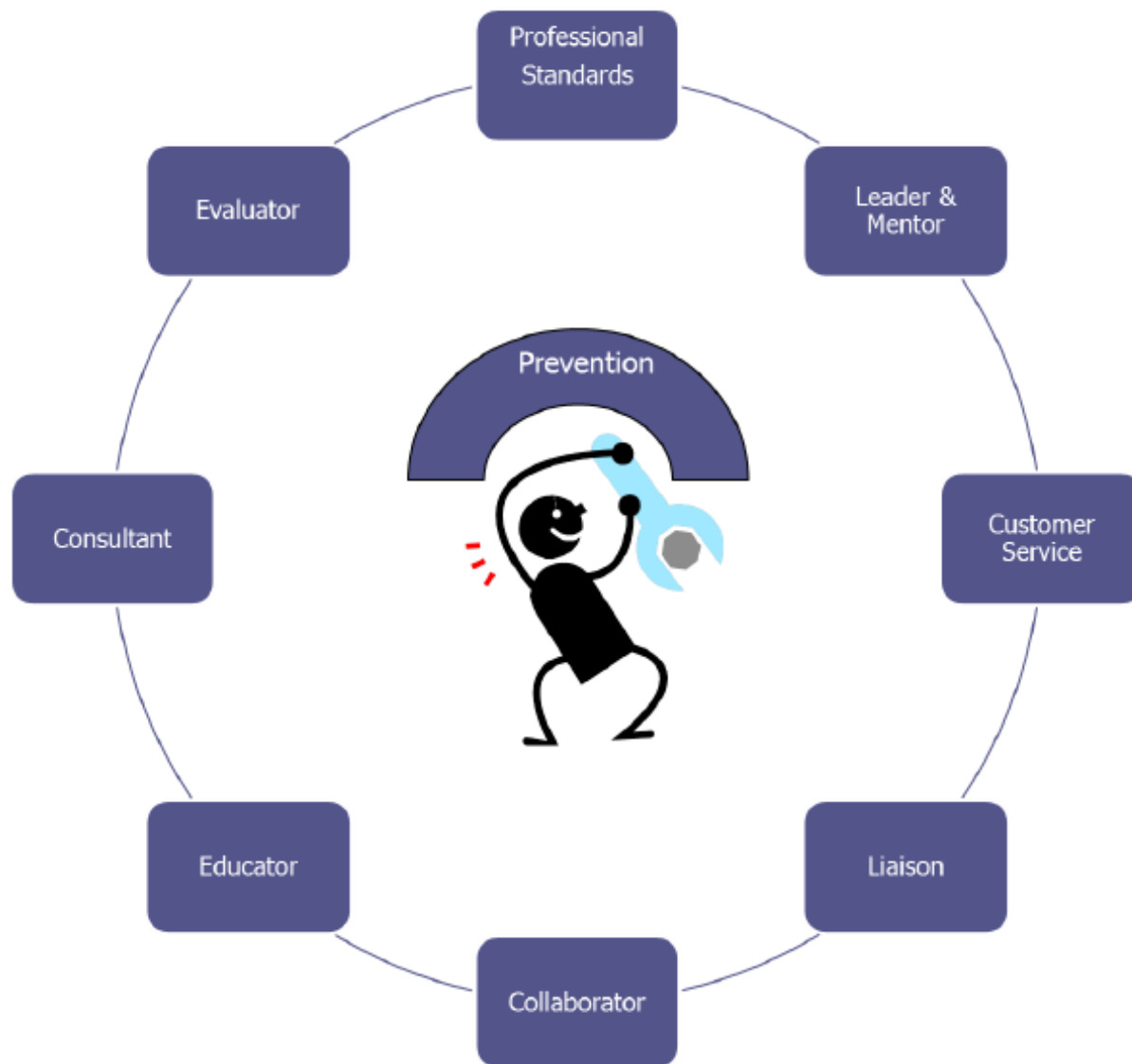
People may want to do the right thing, but they need clear direction, consultation, and support

What is the Role of the IP?

# PREVENTION !



IPs need tools for serving in many roles and to accomplish prevention objectives



# Professional Standards for IPs

- Professional Accountability
  - Acquire and maintain knowledge and skills
    - Attend educational conferences
    - Join professional organizations (e.g. APIC)
    - Participate in State & local public health events
- Qualifications for hospital-based IP
  - Baccalaureate (minimum)
  - Basic training – IP fundamentals course
  - Knowledge and experience





# IP as Evaluator

- Annual Risk Assessment
- Infection Prevention Plan
- Unit rounding
  - Nursing units, OR, GI Lab, Radiology, ED, Clinics
- Perform surveillance
- Investigate suspected outbreaks
- Educate based on prevention needs/problems



# IP as Consultant

- Construction
- Floods, Fires
- Family and visitor issues
- Dietary, EVS, Lab
- Pet Therapy
- Pandemic!!!

And  
more...

IPs have influence – know how to use it to keep patients, staff and visitors safe



# IP as Educator

- Evidence-based practices
- Infection risk, prevention and control methods
  - Annual Bloodborne Pathogens and ATD classes
  - Updates on Pandemics
    - Influenza, Pertussis, Measles
  - New Employee Orientation
  - Volunteers, Construction Workers, Students
- Community Classes

The public likes to hear  
what IPs have to say



# IP as Collaborator

- It really is ALL about relationships
  - Get to know EVS Director
  - Have lunch with OR Director
  - Sit next to Engineering during facility meetings
  - Marketing staff can be very helpful
  - Materials Management need to know the IP
  - Remember National Laboratory Week
- The list is endless...IPs collaborate during disasters, outbreaks, community projects – get to know people now!



# IP as Liaison

- Definition: A person who acts as a link to form close working relationships with other people or groups
- IPs serve as link to
  - ✓ Local public health  
THE connection to local services, resources
  - ✓ CDC-NHSN  
For prevention guidelines and surveillance
  - ✓ Regulators  
For requirements specific to infection prevention
  - ✓ Patients, visitors, staff, and administration
- IPs serve as the voice of the facility when infection concerns are brought to the table



# IP as Customer Service

- Who are infection prevention customers?
  - Patients
  - Staff
  - Physicians
  - Visitors
  - Community
  - Public Health
  - Anyone who calls for your consultation services!



# IP as Mentor and Leader

- IPs should identify needs/desire for mentorship
  - Staff nurses interested in IP
  - Students needing a preceptor
  - Begin an IP Liaison team
- IPs are role models and leaders
  - Make decisions related to ethics and regulations
  - Responsible for IP Policies and Procedures



## California SB739

Remember IPs can't  
own all infection  
prevention  
responsibilities alone

If more resources are  
needed, inform  
administration in a  
professional and  
collegial way

1288.6. (a) (1) Each general acute care hospital, in collaboration with infection prevention and control professionals, and with the participation of senior health care facility leadership shall, as a component of its strategic plan, at least once every three years, prepare a written report that examines the hospital's existing resources and evaluates the quality and effectiveness of the hospital's infection surveillance and prevention program.

(2) The report shall evaluate and include information on all of the following:

- (A) The risk and cost of the number of invasive patient procedures performed at the hospital.
- (B) The number of intensive care beds.
- (C) The number of emergency department visits to the hospital.
- (D) The number of outpatient visits by departments.
- (E) The number of licensed beds.
- (F) Employee health and occupational health measures implemented at the hospital.
- (G) Changing demographics of the community being served by the hospital.

88

### — 3 — Ch. 526

(H) An estimate of the need and recommendations for additional resources for infection prevention and control programs necessary to address the findings of the plan.

(3) The report shall be updated annually, and shall be revised at regular







# Questions?

For more information, please contact any  
HAI Liaison Team member

Thank you

